Combined Declaration For Patent Application and Power of Attorney						ATTORNEY DOCKET							
As below named inventor, I hereby declare that:  My residence, post office address and citizenship are as stated below next to my name,  I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:													
METHOD AND SYSTEM FOR AUTOMATIC IMAGE ADJUSTMENT FOR IN VIVO IMAGE DIAGNOSIS													
The specification of which (check only one item below):													
X is attached hereto.													
was filed as United States Application Serial No. on and was amended on (if applicable).													
was filed as PCT international application Number on and was amended on (if applicable).													
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment													
referred to above.  I acknowledge the duty to disclose to the U.S. Patent & Trademark Office all information known to me to be material to patentability as defined in Title													
37, Code of Federal Regulations, §1.56.  I hereby claim foreign priority benefits under Title 35, United States Code, §119 (a)-*d) or 365 (b) of any foreign application(s) for patent or inventor's													
certificate, or (365 (a) of any PC7	Γ international app	lication(s) which	designa	ites at least one country otl	ner than the U	Jnited S	States of Ame	rica, liste	ed below				
and have also identified below any foreign applications(s) for patent or inventor's certificate or any PCT international application(s) designating a least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which													
priority is claimed: PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:													
COUNTRY COUNTRY (#PCT_indicate PCT)  APPLICATION NUMBER DATE OF FILING (monit/dayvear)  PRIORITY CLAIMED UNDER 35 USC §119 (monit/dayvear)													
				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			YES		NO				
							YES		NO				
			·				YES		NO				
I hereby claim the benefit under Title 35, United States Code, 119 §(e) of any United States provisional application(s) listed below:													
PRIOR PROVISIONAL APPLI	CATION(S) ANI	ANY PRIORIT	Y CLA	IMS UNDER 35 U.S.C.	§119 (e):								
PROVISIONAL AJ	PLICATION NUMBER			<u>, , , , , , , , , , , , , , , , , , , </u>	FILING DATE (mo	ntlvday/year)	· · · · · · · · · · · · · · · · · · ·						
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I hereby claim the benefit under Title 35, United States Code, §120 of any prior United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior applications(s) in the manner provided by the first paragraph of Title 35, §112, I acknowledge the duty to disclose to the U.S. Patent & Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations §1.56, which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:													
PRIOR US APPLICATIONS O 35USC§120:	R PCT INTERN	ATIONAL APPL	ICATI	ONS DESIGNATING TH	E U.S FOR	BENE	FIT UNDER	1					
	U.S. APPL	CATIONS			STATUS (Check one)								
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PCT APPLICATIONS DESIGNATING THE U.S.													
PCT APPLICATION NO. PCT FILING DA		G DATE	1	J.S. SERIAL NUMBERS ASSIGNED (if any)			_		-				
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Combined Declaration For Patent Application and Power of Attorney (Continued)  ATTOR 87976S											
POWER OF ATTORNEY: As a named inventor, I hereby appoint the attorney(s) and/or											
agent(s) associated with Eastman Kodak Company Customer No. 01333 to prosecute											
this application and transact all business in the Patent and Trademark Office connected											
therewith.											
Send Correspondence to: Direct Telephone Calls to:											
Patent Legal Staff (name and telephone number)											
				Company	Stephen H	. Shaw					
343 State Street					1 -	585-477-7419					
Rochester, NY				14650-2201	FAX: 585	FAX: 585-477-4646					
2	FULL NAME OF INVENTOR	FAMILY NAME		FIRST GIVEN NAME	SECOND GIVEN N	SECOND GIVEN NAME					
	RESIDENCE &	Chen city 1862 Crittenden Road, Apt.		Shoupu STATE OR FOREIGN COUNTRY	COUNTRY OF CIT	COUNTRY OF CITIZENSHIP					
٥	CITIZENSHIP	6		New York 14628 USA	People's Re	People's Republic of China					
		Rochester									
1	BUSINESS ADDRESS	BUSINESS ADDRESS Eastman Kodak Compar	าง	343 State Street, Rochester		STATE & ZIP CODE (COUNTRY) New York 14650-2201 USA					
2	FULL NAME OF INVENTOR	FAMILY NAME	.,	FIRST GIVEN NAME	SECOND GIVEN I	SECOND GIVEN NAME					
	RESIDENCE &	Cahill cm 116 Bennington Hills		Nathan STATE OR FOREIGN COUNTRY		D. COUNTRY OF CITIZENSHIP					
O CITIZENSHIP		West Henrietta	•	New York 14586 USA	USA	1					
2	BUSINESS ADDRESS	BUSINESS ADDRESS		CITY		STATE & ZIP CODE (COUNTRY) New York 14650-2201 USA					
$\dashv$	FULL NAME OF	Eastman Kodak Company		343 State Street, Rochester FIRST GIVEN NAME	SECOND GIVEN I						
2	INVENTOR	Ray		Lawrence STATE OR FOREIGN COUNTRY	A.	A. COUNTRY OF CITIZENSHIP					
0	RESIDENCE & CITIZENSHIP	CITY 3861 Elmwood Avenue Rochester		New York 14610 USA	USA						
3	BUSINESS ADDRESS	BUSINESS ADDRESS		СІТУ		STATE & ZIP CODE (COUNTRY)					
_	FULL NAME OF	Eastman Kodak Company		343 State Street, Rochester		New York 14650-2201 USA SECOND GIVEN NAME					
2	INVENTOR				001111777 05 017	riz-vouin					
٥	RESIDENCE & CITIZENSHIP	CITY		STATE OR FOREIGN COUNTRY		COUNTRY OF CITIZENSHIP					
4	BUSINESS ADDRESS	BUSINESS ADDRESS		CITY	STATE & ZIP COD	STATE & ZIP CODE (COUNTRY)					
2	FULL NAME OF INVENTOR	FAMILY NAME		FIRST GIVEN NAME	SECOND GIVEN I	SECOND GIVEN NAME					
٥	RESIDENCE & CITIZENSHIP	CITY		STATE OR FOREIGN COUNTRY	COUNTRY OF CIT	COUNTRY OF CITIZENSHIP					
5	BUSINESS ADDRESS	BUSINESS ADDRESS		CITY	STATE & ZIP COD	STATE & ZIP CODE (COUNTRY)					
2	FULL NAME OF INVENTOR	FAMILY NAME		FIRST GIVEN NAME	SECOND GIVEN N	SECOND GIVEN NAME					
٥	RESIDENCE & CITIZENSHIP	CITY		STATE OR FOREIGN COUNTRY	COUNTRY OF CIT	COUNTRY OF CITIZENSHIP					
6	BUSINESS ADDRESS	BUSINESS ADDRESS		CITY	STATE & ZIP COD	STATE & ZIP CODE (COUNTRY)					
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be											
true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.											
SIGNATURE OF INVENTOR 201 SIGNATURE OF INVENTOR 203 SIGNATURE OF INVENTOR 203											
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DATE			DATE	Ackrown	DATE	<u> </u>					
3/25/2004			3/	24/2004	3-25-	3-25-2004					
SIGNATURE OF INVENTOR 204			SIGNATURE	OF INVENTOR 205	SIGNATURE OF INVENT	OR 206					
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